



Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on:

12-19-2003
(Date)

Sharon A. Shelton
(Name)

Sharon A. Shelton
(Signature)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:

Applicant : Keller et al.
Serial No. : 10/684,655
Filed On : October 14, 2003
Title : SELF-ADJUSTING CHILD HARNESS
Docket No. : ECI06-GN009
Examiner :
Art Unit :

Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313

Dear Sir:

INFORMATION DISCLOSURE STATEMENT

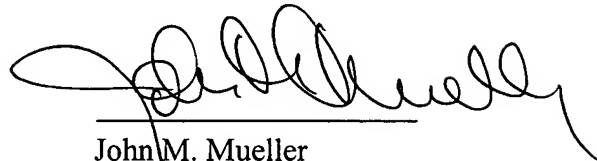
Pursuant to 37 C.F.R. § 1.97, the Examiner's attention is directed to the references listed on the attached Form PTO-SB-08A.

It is to be understood that the present disclosure of art is in no way intended to be a waiver of any arguments or defenses available to the Applicant under the rules of the U.S. Patent and Trademark Office and the statutes of the United States. No fee is required. The Commissioner is hereby authorized to charge any additional fees that may be required by this

Information Disclosure Statement
ECI06-GN009
Page 2

paper, or to credit any overpayment to Deposit Account 200053.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "John M. Mueller", written over a horizontal line.

John M. Mueller
Reg. No. 44,248

TAFT, STETTINIUS & HOLLISTER LLP
425 Walnut Street, Suite 1800
Cincinnati, OH 45202-3957
(513) 357-9610
mueller@taftlaw.com

Substitute for form 1449/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

(Use as many sheets as necessary)

Sheet	1	of	1
-------	---	----	---

Complete if Known

Application Number	10/684,655
Filing Date	10/14/2003
First Named Inventor	Keller et al.
Art Unit	
Examiner Name	
Attorney Docket Number	ECI06-GN009

U. S. PATENT DOCUMENTS

[illegible]

FOREIGN PATENT DOCUMENTS

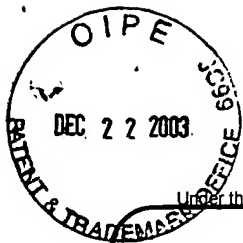
[illegible]

Examiner Signature		Date Considered	
--------------------	--	-----------------	--

***EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹Applicant's unique citation designation number (optional). ²See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶Applicant is to place a check mark here if English language Translation is attached.

This collection of information is required by 37 CFR 1.97 and 1.98. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.



PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/684,655	
	Filing Date	10-14-2003	
	First Named Inventor	Keller et al.	
	Art Unit		
	Examiner Name		
Total Number of Pages in This Submission	5	Attorney Docket Number	ECI06-GN009

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): RETURN POST CARD
Remarks IDS INCLUDING FORM PTO/SB/08A		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	John M. Mueller, Reg. No. 44,248 Taft Stettinius & Hollister LLP
Signature	
Date	12-19-2003

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	Sharon A. Shelton, Paralegal
Signature	
Date	12-19-2003

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.